

5
INTRODUCTORY ADDRESS

TO

A Course of Lectures

ON

FORENSIC MEDICINE

DELIVERED AT

KING'S COLLEGE, LONDON,

BY

WILLIAM ROBERT SMITH, M.D., D.Sc., F.R.S.Ed.,

BARRISTER-AT-LAW

PROFESSOR OF FORENSIC MEDICINE IN KING'S COLLEGE, LONDON

ETC., ETC.

LONDON.

1889.

LONDON :

T. W. DANKS AND CO., PRINTERS, DEAN STREET,
SOHO SQUARE, W.

INTRODUCTORY ADDRESS.

GENTLEMEN,—In addressing you for the first time as a teacher in King's College I cannot refrain from expressing my deep sense of the honour conferred upon me, by my election to the chair which I now occupy, and, at the same time, my earnest hope that the confidence thus reposed in me may not prove to have been misplaced.

In considering how best I could discharge my duty to you under the circumstances by which we meet to-day, it would appear that I should in the first place endeavour to forcibly impress upon your minds the great importance of the subject which we have to study, together with the responsibility which will rest upon you, in your future careers, when you are called upon to make practical use of the knowledge thus obtained, before we pass on to note something of the history of Forensic Medicine as a part of ordinary medical education and practice, and those preliminary legal considerations, which, with the laws of evidence, are obviously of primary importance.

Gentlemen, it is well for us that we should thus early endeavour to grasp something of the importance and responsible character of our task. Your medical career as students is now fast drawing to a close, and your very first day in practice may bring you face to face with a case of medico-legal interest, requiring all your thought and acumen, together with great powers of observation, intimate knowledge of life, and a logical mind. Many cases might be quoted in illustration of the contingency which may thus arise. A body of an infant has been found—What is the maturity of the child? Was it born dead or alive, and if alive what has been the cause of death? A girl accuses a man of rape. Is there any or no ground for such an accusation? A pregnant woman accuses her husband of cruelty. Is there justification for such a charge, or is the allegation but one of the indications of a mind morally diseased.

Such questions may be presented to you at any moment in your career; questions upon the solution of which by you will involve the life or death of the accused, the liberty or imprisonment of the person charged, the happiness of domestic life wrecked—children deprived of the parental care they had a right to expect, together with, to the parties principally concerned mental anguish and pecuniary loss—or, by the exercise on your part of care, judgment, knowledge, and an unprejudiced mind, the mental cloud dispersed, the domestic unity unbroken, the childrens' interests maintained.

I would have you grasp to the full the responsibilities involved in the practice of Forensic Medicine—responsibilities both to yourselves and to others—to yourselves, for one such case may mar or

ensure your future professional career ; if your evidence be obviously one-sided, biassed, or unskilful, or be influenced by popular sentiment or friendship, or display a want of common sense or professional or scientific knowledge, then your position as a reliable medical practitioner must be damaged ; whilst on the other hand, by the exercise of thought, knowledge, common sense, perception, and judgment, it may be made ; to others, reflect for a moment how often the medical evidence determines the verdict, especially in criminal cases. How awful is the meaning to the prisoner standing in the dock of the one word " guilty " pronounced by the foreman of the jury, in response to the demand of the Court, " Do you find the prisoner guilty or not guilty ? " Realise the full force of this word, the life doom, or death of the prisoner, the ruin of a family. Let these thoughts quicken your judgment, and increase your care, be zealous for the truth, estimate all details at their right value, be not swayed by a sensational or unfairly sympathetic spirit ; give your evidence fearlessly and unprejudiced, but see to it that it is the result of accurate observation, sound judgment, and a thoroughly honest conviction. I would not here dilate with such emphasis were it not unfortunately the fact that medical evidence does not carry with it the weight its importance deserves, for which in my opinion the profession alone has itself to blame, and were it not also, for example, within my own experience of numerous instances where the great ignorance or want of judgment on the part of the medical witness has resulted in the most serious and unjust consequences to the parties concerned.

You have had the very great advantage of a thoroughly good professional training under the most distinguished teachers ; in the

earlier part of your career, your thoughts were more particularly directed to that great subject, Chemistry, a thorough mastery of which was essential to a right appreciation of physiological truths, and a knowledge of the action of drugs; later on your attention was directed to the study of medicine, surgery, and midwifery in their proper sense; you visited the wards of our excellent hospital under the guidance of its physicians and surgeons; you were there taught the necessity for accurate observation and the most careful attention to details, if you would make good and successful practitioners; and here to-day we meet, as it were, in the closing scene of your student life, to learn something of the practical application of all these sciences, of all this knowledge, to cases which may arise at once in your practice, cases in which the law will seek your guidance and direction. Be not discouraged by the difficulties and dangers which await you; encounter them with a sound judgment and a determined courage, together with a firm resolve to do your duty both to your neighbour and yourself in that path of life it has pleased Providence to place you.

STATE MEDICINE, Gentlemen, is a generic term applied to that department of medical science which deals with subjects upon which a medical man may be consulted by the executive or the legislative part of the Government of the country.

The designation appears to be of German origin, apparently being first employed by Daniel in the year 1784, when he published a work at Halle to which he gave the title of "*Bibliothek der Staatsarzneikunde*"—*Bibliotheca of State Medicine*.

The general application of the term is obviously very far-

reaching, embracing as it does not only all questions included under the title of Forensic Medicine, with which we shall be exclusively concerned, but also those subjects embraced within the term Medical Police, or better, Public Health, which deals with the modes of preserving or ameliorating the general health of the community, whether it be from a consideration of climateric conditions affecting disease or from observations of the topographical position of towns, camps, or habitations, their water supply, heating and lighting, ventilation, drainage and sewerage, or from a correct appreciation of the proper sanitary administration of schools, hospitals, theatres, prisons, churches, cemeteries, quarantine establishments, together with the details of the scientific treatment of epidemic and endemic diseases with the view of their prevention or spread.

Not only is the medical man concerned in the practical administration of the laws bearing upon these great sub-divisions of the department of State Medicine, but he is also liable to be consulted whenever it is contemplated to enact laws, with the view for example, of checking or preventing epidemic diseases, of remedying public nuisances, of putting a stop to unhealthful customs among collections of persons, of regulating hospitals and other like public institutions, prisons, or reformatory schools, and of preserving the health of the Army and Navy.

With the subject of Public Health or Hygiene it is not my province, Gentlemen, to deal; it belongs to my able colleague, Professor Charles Kelly, whose class I would very strongly advise you to attend; but I cannot refrain from alluding to its present

satisfactory position in public estimation, and the recognition accorded it by the State.

For many years the necessity which existed in the interests of the public for medical men engaged in public health work giving some proof of their acquaintance with the duties they were called upon to fulfil was urged upon the notice of the General Medical Council, together with the various Universities and Licensing Bodies; as a consequence, committees were appointed and reports presented, and in 1871 the University of Dublin first instituted an examination and bestowed its diploma in State Medicine upon four candidates; four years later, in 1875, the Universities of Cambridge and Edinburgh instituted examinations in Public Health and granted diplomas, since which time the remaining Universities and Licensing Bodies have done likewise.

An important forward step was taken in 1886—mainly through the action of the Public Health Medical Society, of which at the time I had the honour of being the Chairman of Council—by which such Diplomas became registrable as “*additional qualifications*” by the General Medical Council under the provisions of Section 21 of the Medical Act, 1886; the further consequential step of such State recognition was urged upon the notice of Her Majesty’s present Government last year, viz., of rendering compulsory the possession of such a qualification upon candidates for appointment as Medical Officers of Health, with the result that by Clause 18 of the Local Government Act, 1888, on and after the 1st of January 1892, no person can be appointed a Medical Officer of Health to a district of 50,000 or more inhabitants unless he possesses such a qualification, or has been, for three consecutive years, a Medical

Officer of Health to a district having a population of at least 20,000 inhabitants.

The important privileges thus attendant upon the possession of such a diploma cannot fail to influence largely the acquisition of the necessary knowledge to obtain it, for although at present its possession is only necessary for the more important Health offices, yet the moral effect will be to largely increase the chances of any person possessing it for appointments of lesser value ; an aspect of the case which cannot fail to be generally recognised.

The third subdivision of this great subject of State Medicine is embraced under the word "Ambulance," the French ambulance, *hôpital ambulant*, derived from the Latin *ambulare*, to move from place to place.

In military phraseology, Ambulances are Hospital establishments moving with armies in the field, and should be so organised as to give the earliest possible surgical assistance to the wounded after an engagement ; they are only intended to afford help of a more or less temporary kind, and they are thus distinguished from the stationary or field hospital, in which sick or wounded soldiers receive care and treatment of a more permanent character. In this country the term is commonly misapplied to the ambulance wagons, or other conveyances by which the wounded are carried from the field to the ambulances and fixed hospitals. Such vehicles are merely part of the ambulance equipment. The ambulance system which now prevails in all civilised armies only dates from the latter part of the last century ; before that time no ambulance establishments had been organised for the removal of the wounded

during the progress of a battle, or for giving them necessary surgical attention. Soldiers wounded in the ranks were either carried to the rear by their comrades, or more frequently were left exposed to all risks until the fighting had ceased, or until the means of surgical assistance reached the battlefield, which was generally the day after the engagement, when, to a large proportion of the wounded it was of no avail. In 1792 Larrey introduced his system of *ambulances volantes* or flying field hospitals, establishments capable of moving rapidly from place to place. These were adapted not only for rendering the necessary primary surgical assistance, but also for rapidly transporting the wounded out of the sphere of fighting. Larrey found in Napoleon I. a warm supporter in his endeavours, and such likewise being received with great favour by the troops, the plan soon obtained a firm footing, and was subsequently greatly developed. About the same time Baron Percy, another distinguished surgeon of the French army, introduced a corps of Stretcher Bearers or *brancardiers*. This corps consisted of soldiers properly equipped and trained for the duty of collecting the wounded during the progress of a battle and carrying them on stretchers to a place where proper surgical aid could be obtained. From this period most civilised armies have had Ambulance establishments ready to give surgical help near to the combatants, but it is only during the last thirty-five years that ambulances have acquired the completeness of organisation which is now to be seen in some armies, especially in those of Germany. During the late Civil War in America the ambulance system attained a very perfect organisation, especially after Congress passed an Act in 1864 "to establish a uniform system of ambulances in the United States," which law fixed a

definite system of ambulance arrangements for all the United States armies at that time in the field.

In our army the ambulance arrangements have never reached the degree of completeness which we find in some continental armies. During the Peninsular War the want of a trained ambulance corps and properly constructed sick transport was much felt and commented on. Soldiers from the ranks were substituted for the former, who were not only unsuited for the work, but whose employment necessarily reduced the fighting strength; for the latter, commissariat waggons or agricultural carts were employed. Notice was directed to our defects by many of our distinguished military surgeons of that time, but no attention appears to have been paid to their writings, nor did the wars in which our troops were subsequently engaged in India, China, the South of Africa or elsewhere, lead to the like improvements as were to be found in continental armies, so that when the Crimean War broke out in 1854 the English army was still without an ambulance corps or an ambulance establishment of matériel. The experience of this war led to efforts to repair the defects which were then manifest. Since that time a trained medical staff corps has been constituted and the ambulance equipment revised.

One important step was taken a few years since towards the amelioration of the condition of the wounded of armies in the field, and by which the development of ambulance establishments has been greatly encouraged. I mean the European convention signed at Geneva in 1864, by the terms of which, not only the wounded themselves but the official staff of ambulances and their equipment have been rendered neutral, the former, therefore, not liable to be

retained as prisoners of war, nor the latter to be taken as prizes of war. The present conditions of modern warfare have very much modified the principle upon which army ambulances were arranged only a few years since—the greatly increased range of rifles and artillery, and consequent extension of the area over which fire is maintained, the suddenness with which armies can be brought into the field, owing to increased facilities of locomotion, the rapidity of their movements, the shortened duration of campaigns, the large number of wounded which have to be dealt with, not alone owing to the destructive qualities of the fire arms but to the large forces present, and the consequent greater proportion of severe wounds, have all necessitated a revision of our ambulances and administration.

For any system to be perfect two primary conditions must be fulfilled.

1. Our soldiers fighting for and falling wounded in the cause of our country, have a right to expect and demand that they shall in every sense, under such circumstances, be properly and skilfully cared for.

And 2, by the arrangements must be such that the movements of the general commanding shall in no case and under no circumstances be impeded by the presence of wounded men, but that prompt and effective measures shall at all times be in operation to remove such to the rear.

The ambulances must therefore be so organised as to keep up with the troops, and so disposed as in no way to interfere with their movements; they must be capable of meeting the requirements of an engagement at any moment, and be prepared at all times to advance with the troops.

The details of medical organisation when a battle is fought with our present ambulance system admit of four help stations being established in rear of the combatants. They are :—

1. The field station for help of prime urgency.
2. The collecting station, where the wounded are collected from the battle field and transferred from hand conveyances to ambulance waggons.
3. The dressing station, where provisional dressings are applied.

And 4, the field hospital, where definite treatment will be adopted.

The field station is in the immediate rear of the troops, moving with them, and therefore under fire. The aid is provided by regimental surgeons and regimental bearers, who provide such temporary assistance as is of vital importance, and then move on with the main body, leaving the wounded to be further attended to by the men of the Bearer Company or Medical Staff Corps, who by means of stretchers or improvised seats carry them to the collecting station, which is just out of range of the enemy's rifle fire, at a place practicable for waggons, about 800 or 900 yards in rear of the troops engaged. From this point the wounded are conveyed by ambulance waggons to the third or dressing station, which is placed out of range of artillery fire, at a spot easily reached by the ambulance waggons, near to a well or running stream, and on the way to the fourth station. This 3rd, or dressing station, is about 800 or 1,000 yards in rear of No. 2. At this point food is provided for the wounded, and capital operations may be performed. In rear of No. 3 station, at a distance of some two or four miles

behind the combatants, is the Field Hospital. This may be at a farm or country house, or in a village, or be under canvas, and contain 100 beds.

In rear of this hospital again, at a further distance of two or three miles, would be another field hospital, and so on until the base of operations is arrived at, where there would be either one or more base hospitals or hospital ships, from which from time to time would be transported by proper sick transports the sick and wounded to the various military hospitals in England.

Of late years efforts have been made to organise a medical reserve in connection with our auxiliary forces, based upon the lines now in operation with the regular army, and it is a subject for congratulation that you, gentlemen, recognising the necessity, have not been backward in allowing this College to take its proper place in that part of the scheme known as the Volunteer Medical Staff Corps.

The application of this branch of State Medicine to every-day life is a subject of importance, and it is satisfactory to note that this is not being lost sight of, the establishment of Ambulance Stations in the streets of our more thickly populated districts is a movement which deserves most cordial support.

The division of State Medicine with which, however, we are alone concerned, is that known as Forensic or Legal Medicine, or Medical Jurisprudence.

The most common epithet is Forensic Medicine, this is the designation given to our course, and it is far the best. The Romans, as you know, tried their causes in the forum, and whatever related

to the trial of such causes was termed forensic. We attach the same meaning to the word, and we understand it to embrace all these points of a medical character upon which we may be consulted in a court of justice.

Medical jurisprudence is a term used synonymously with Forensic Medicine, but wrongly so—Medical Jurisprudence is really a knowledge of that part of the law which relates to medical subjects—*jus* is law, and *prudentia* knowledge, consequently *jurisprudentia* is the knowledge of the law; and obviously this may be limited to contain departments of the law as a whole: *e.g.*, it may be confined to the law of crime, and is then termed criminal jurisprudence, or to the law on medical subjects, when it is spoken of as medical jurisprudence; this meaning of the designation would appear perfectly clear, yet there has always prevailed in its employment a vagueness. In the work of Dr. J. Gordon Smith, to which I shall presently have to allude, he speaks of forensic medicine and medical jurisprudence as synonymous terms, and in the present day Medical Jurisprudence is in many Universities, and Medicine Schools, the designation given to the chair, which would, as in this College, be more properly styled that of Forensic Medicine.

It will be my duty, however, notwithstanding the fact that Medical Jurisprudence is evidently no part of Forensic Medicine, to point out to you from time to time the bearings of the law upon those questions which it is more particularly our province to enquire into; in this way you will, I think, not only more clearly grasp the position, but will the better appreciate the importance of the whole subject.

The true origin of Forensic Medicine is of comparatively recent date, although traces of its principles may be perceived in remote times. The ancient Greeks applied the principles of medicine only to the legislation affecting certain phrases of the question of legitimacy, but in some of the writings of Galen will be found remarks on the differences which exist between foetal and adult lungs, or feigned diseases, and the legitimacy of seven months children. In Rome we find that by the law of the twelve tables three hundred days are fixed as the extreme limit of utero-gestation, and in the code of Justinian such titles as *De Statu Hominum*, *De Impotentia*, *De Hermaphroditia*, &c., give undoubted evidence of a recognised connection between medicine and law. Such questions, however, were to be sealed not by the evidence of medical witnesses but on the authority of Hippocrates—indeed it would appear doubtful whether the medical examination of dead bodies was at that time in any sense authorised by the Roman Law.

The relationship which existed between medicine and the law had been long recognised before it was considered as a special branch of study, or had even obtained a distinctive appellation as its importance became more fully acknowledged, it was known in Germany—in which country it first took its rise—as *State Medicine*, in Italy and France as *Legal Medicine*, and later with us as *Medical Jurisprudence* or *Forensic Medicine*.

As a science *Medical Jurisprudence* cannot date further back than the 16th century; various German emperors had from time to time endeavoured to introduce a uniform criminal code without effect; in 1507 the Bishop of Bamberg proclaimed a penal code in which the necessity of medical evidence in certain cases was

first recognised. In 1532 the Emperor Charles V succeeded in persuading the Diet of Ratisbon to adopt a uniform code of penal jurisprudence; one of the principal clauses being an injunction to the magistrate in all cases of personal injuries, infanticide, murders, &c., to obtain the evidence of medical witnesses.

In 1553 the celebrated "*Constitutio Criminalis Carolina*" was published which marks the dawn of Legal Medicine, and Germany its birthplace, and to this country rightly belongs the glory of having been the first to throw the shield of medical science around the victims of a dark fanaticism. At this time the belief in witchcraft and sorcery was at its height, thousands of persons had been burnt alive both in Germany and France, at Friedberg public prayers were offered to stop the dire affliction. It was in 1564 that Weiher, physician to the Duke of Cleves, first had the courage to question these superstitious notions in a pamphlet published at Basle. He undertook to prove that witches and demoniacs ought properly to be considered as unfortunate persons subject to hypochondriasis or hysteria, who should be the subjects of pity rather than punishment, whilst he ridiculed the measures by which these unfortunate persons were proved to be guilty of crimes. This publication created such indignation and cries for vengeance that Weiher was himself only saved from the flames by the powerful intercession of the Duke.

Towards the close of this century many works on different branches of Legal Medicine appeared in various countries. Ambrose Paré wrote on "*Monstrous Births*," on "*Simulated Diseases*," and on "*The Art of Drawing up Medical Reports*," whilst in 1598 the first "*System of Legal Medicine*" was published in

Sicily by Fortunato Fidele. From 1621 to 1635 a number of successive volumes appeared entitled "Quæstiones Medico-Legales," by Paulo Zacchia, which must be regarded as a land mark in the history of the subject, and which stamped its Roman author as the greatest medico-jurist of his time. These volumes display an immense amount of learning and sagacity when chemistry was in its infancy and physiology but little understood. Harvey's discovery of the circulation of the blood soon followed, and this gave a great impetus to the study of these branches of Forensic Medicine having a relationship to physiology; and to him we owe the idea how to practically apply Galen's observations on the differences between foetal and adult lungs in cases of supposed infanticide.

About this time two books were published by Melchior Sebiz. In the one the existence of the hymen was insisted upon as the true indication of virginity, in the other the importance of distinguishing between wounds *incidentally* and *necessarily* fatal was pointed out.

About 1663 Thomas Bartholin, a Danish physician, investigated the period of human utero-gestation, a subject which had engaged the attention of Aristotle and proposed the hydrostatic test as an evidence of live birth, which was first applied to practical use by Jan Schreyer in 1682.

About the middle of the seventeenth century, Michaelis gave his first course of lectures on Medical Jurisprudence in the University of Leipzig, which were soon followed by the lectures of Bohn, who also published a series of very valuable works, entitled "De Renunciatione Vuln^{er}um," "Dissertationes Medicinæ Forensis," and "De Officiis Medici Duplici Clinici et Forensis."

In France Forensic Medicine is said to date as a science from the twelfth century in the rules given in the "Assizes of Jerusalem" for drawing up exemptions from certain civil and military duties. In 1603 Henri III authorised his physicians to appoint persons skilled in medicine and surgery to make judicial inspections and reports in all cities and royal jurisdictions. In 1692 Louis XIV created hereditary royal physicians and surgeons for the same purpose, with certain immunities and privileges, but their competition became so notorious that they were suppressed in 1790; however, various decrees passed subsequently by the Parliament of Paris tended to the improvement of Legal Medicine.

During this century the only works which appeared were Gendry's "Sur les Moyens de bien rapporter à Justice," and Blégnys's "L'Art de faire des Rapports en Chirurgie."

During the eighteenth century much progress was made. In 1722 Valentini published an excellent work entitled "Corpus Juris Medico-legale," which embodies a review of the labours of all that had been done up to that time, and forms a vast store-house of medico-legal information, and gives a summary of the knowledge of the time. Many professorships were founded about this time for teaching the subject in the German universities, and German writers became very numerous. Teichmeyer's "Institutiones Medicinæ Legalis" long formed the text-book on the subject, whilst subsequently the "Systema" of Alberti, Professor of Legal Medicine at Hallé, in six quarto volumes, was the most complete and laborious work that had ever been published on the subject. Towards the close of the last century the Germans were almost the only successful cultivators of Medical Jurisprudence. In 1784 the "Bibliothek" by Daniel, appeared, and the term "State Medicine" is here first applied to this branch of knowledge.

During this time little was done in Italy, and in France the subject was attracting but slight attention until the celebrated case of *Ville-blanche* called forth the memoir of Louis on the period of utero-gestation, in which he powerfully attacked the pretended instances of protracted pregnancy and paved the way for the adoption in the Code Napoleon of 300 days as the limit of utero-gestation. He also wrote a valuable treatise on the anatomical examination of bodies found hanged, and clearly pointed out those means by which it were possible to distinguish homicide from suicide under such circumstances. During the latter part of this century various other works appeared, and in 1798 the excellent "*Traité de Médecine Légale*" of Fodéré.

In England there was no treatise on Forensic Medicine until the small volume by Dr. Samuel Farr appeared in 1788, which was merely an abridgement of an earlier work of Fazellius. Although medico-legal questions had been treated in the writings of Mead, Percival, Monro, John Hunter, and William Hunter, ~~but~~ the importance of the study was in no sense understood in this country.

Towards the end of the century three professorships of Forensic Medicine were instituted in France, and in the present century that country undoubtedly took the lead. In 1814 appeared the important work on Toxicology, by Orfila, a Spaniard, but naturalised in France. Since 1829 the "*Annales d'Hygiène Publique*," which extend to many volumes, have published most valuable essays on this branch of science; numerous other works of great value have also been produced.

In Germany, likewise, many contributions have been made to the literature of the subject, of which the most noteworthy is that of Caspar, which has passed through many editions, and been translated into English, French, Italian, and Dutch. In Russia Dragendorff has greatly added to our knowledge of poisons.

Italy has not added much to the literature, the "*Medicina Legale*," by Barzellotti is, however, worthy of note.

Medical Jurisprudence may fairly be said to have only commenced in Great Britain with the present century. The first lectures were delivered in the University of Edinburgh in 1801 by Dr. Duncan, and two years after the first Professorship in Great Britain was conferred by the Crown upon his son, since which time Chairs have been created at most of the Universities, and Lectureships at the various Medical Schools, and the subject now forms a recognised and obligatory part of medical study. In our own College we have been singularly fortunate in the Professor of Forensic Medicine. In 1831, the first year a course of lectures was given in England, Sir Thomas Watson was elected, and he was followed by Dr. Fergus and Dr. Guy, the last occupant being my distinguished predecessor, Professor David Ferrier.

In 1863 the University of London made Forensic Medicine a separate subject for examination and honours for medical graduation.

The first original British work on Medical Jurisprudence was Dr. Male's "*Epitome of Juridicial Medicine*," published in 1816. "*Medical Jurisprudence in Relation to Insanity*," was published in 1818 by Dr. Haslam; but the most important work was Dr. Gordon Smith's "*Principles of Forensic Medicine*." Professor Christison's "*Toxicology*" appeared in 1829, and has passed through three editions. Dr. Beck's American work is also well worthy of note.

The best English works of the present day are Dr. Taylor's "*Principles and Practice of Medical Jurisprudence*," edited by my friend, Dr. Stevenson; Dr. Tidy's valuable work on "*Legal Medicine*," the excellent Text-book by Drs. Guy and Ferrier, and Ogston's "*Lectures on Medical Jurisprudence*."

The best known works by American authors are Marston and Stille's Manual, and Wormley's "Toxicology."

Numerous treatises have appeared, many of them of great value, on Insanity, marking great progress in this branch of our subject, but these need not further detain us.

With this brief sketch of the history of our subject, I will conclude these preliminary remarks. It will be our duty to master the details in future lectures, let us enter upon that duty with earnestness—for of all things this is the *most* essential—the one great element, the soul of success—perseverance, energy, the determination not to be beaten—by whatever name that quality goes, or whatever form it assumes, is the one great quality that will enable you to master the difficulties that you will certainly find in your path in your future careers.

Let us together study the science, and learn the practice of our work with earnestness, with energy, and with perseverance, being thoroughly alive to the responsibilities which may rest upon us, and the vital interests which at times may be in our hands. As your teacher, I shall endeavour to realise my responsibility, both to you and to this College; to you by forcibly placing before you the various subjects with which we shall have to deal, and to the College by the use of every effort to place this Department of her work in the front rank in this City—and you, realise the responsibility resting upon you, by availing yourselves of every means offered to make you good honest practitioners, and in so doing, wherever your lot may be cast, we may be assured that your life's work is being successfully carried on, and the credit of your *alma mater* sustained.